

**ISSUE SLIP STAPLE AREA (for additional cross references)**

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MSA</i>	<i>12</i>	<i>11/5/99</i>
O.I.P.E. CLASSIFIER			<i>11/10</i>
FORMALITY REVIEW	<i>DM</i>	<i>72223</i>	<i>12-2-99</i>

## INDEX OF CLAIMS

.....	Rejected	N .....	Non-elected
.....	Allowed	I .....	Interference
(Through numeral).....	Canceled	A .....	Appeal
.....	Restricted	O .....	Objected

Claim	Final	Original	Date
1	✓	✓	8/12/62
2	✓	✓	5/73
3	✓	✓	0
4	✓	✓	0
5	✓	✓	0
6	✓	✓	0
7	✓	✓	0
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	✓
11	✓	✓	✓
12	✓	✓	✓
13	✓	✓	0
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**If more than 150 claims or 10 actions  
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